OIPE JC67
MAY 27 2003
PATENT & TRADEMARK OFFICE

AF/2 3600

15-CT-5233
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: David M. Hoffman

Serial No.: 09/735,131

Filed: December 12, 2000

For: SOLID-STATE CT DETECTOR MODULES WITH IMPROVED SCINTILLATOR/DIODE COUPLING

Art Unit: 2878

Examiner: Constantine Hannaher

CERTIFICATE OF MAILING BY EXPRESS MAIL TO THE COMMISSIONER OF PATENTS AND TRADEMARKS

Express Mail mailing label number: **EV 339986392 US**

Date of Mailing: **May 27, 2003**

I certify that the documents listed below:

- Amendment Transmittal form (3 pgs.), in duplicate
- Amendment After Final in response to Office Action dated February 27, 2003 (23 pgs.)
- Submission of Marked Up Claims (4 pgs.)
- Request for Approval of Drawing Changes (1 pg.)
- One (1) sheet of drawings showing changes in red
- One (1) sheet of new Formal Drawings
- Return Post Card

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to: Commissioner for Patents, Mail Stop: AF, P.O. Box 1450, Alexandria, VA 22313-1450.

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:

Amendment After Final in response to Office Action dated February 27, 2003 (23 pgs.); Submission of Marked Up Claims (4 pgs.); Request for Approval of Drawing Changes (1 pg.); One (1) sheet of drawings showing changes in red: One (1) sheet of new Formal Drawings; Certificate of Express Mail (1 pg.) Return postcard

STATUS

2. Applicant

_____ Claims small entity status.
__✓__ is other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

✓ deposited with the United States Postal Service with sufficient postage as "Express Mail Post Office to Addressee" in an envelope addressed to: Commissioner for Patents, Mail Stop: AF, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: May 27, 2003

FACSIMILE

__ transmitted by facsimile to the Patent and Trademark Office

Thomas M. Fisher
Reg. No. 47,564

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

(a) ____ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
____ First month	$ 110.00	$ 55.00
____ Second month	$ 410.00	$ 205.00
____ Third month	$ 930.00	$ 465.00
____ Fourth month	$1,450.00	$ 725.00
____ Fifth month	$1,970.00	$ 985.00

Fee: $ _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

____ An extension of _____ months has already been secured. The fee paid therefor $_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request $

OR

(b) ✓ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL	30	MINUS	30	= 0	x $9 = $		x $18 = $
INDEP.		MINUS		= 0	x $42 = $		x $84 = $
___	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ $140 = $		+ $280 = $
					TOTAL ADDITIONAL FEE $	OR	TOTAL ADDITIONAL FEE $

(a) ✓ No additional fee for claims is required.

OR

(b) ____ Total additional fee for claims required $

FEE PAYMENT

5. ____ Attached is a check in the sum of $_____

____ Charge Deposit Account No. 01-2384 the sum of $ _____
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. ✓ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

✓ If any additional fee for claims is required, charge Deposit Account No. 070845 (GE Medical Systems).

7. ____ Other:



Thomas M. Fisher, Reg. No. 47, 564
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in Drawing Changes
6/3/03 D. Bell

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REQUEST FOR APPROVAL OF DRAWING CHANGES

Mail Stop: AF
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Pursuant to 37 C.F.R. § 1.121(d), Applicant hereby submits one substitute drawing sheet for Figures 1 and 2 for examination in the above-referenced application. Submitted herewith are two drawings of record showing the proposed changes in red permanent ink for approval by the Examiner. Specifically, Figures 1 and 2 have been amended to add a "prior art" label. Applicant respectfully requests approval of the indicated drawing changes, and submitted herewith is one substitute drawing sheet incorporating the above noted changes.

Respectfully Submitted,

Thomas M. Fisher
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(314) 621-5070

1 Sheet OK Ch
AUG 1 2003